

JUL 07 2005

KCC 4929 (K-C 18,622)  
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## FACSIMILE TRANSMITTAL COVER SHEET

DATE: 7/7/05 ATTORNEY DOCKET NUMBER: KCC4929  
PTO FACSIMILE NUMBER: (703) 872-9306PLEASE DELIVER THIS FACSIMILE TO: McCormick Ewoldt, Susan Beth  
THIS FACSIMILE IS BEING SENT BY: Laura J. Hilmert  
NUMBER OF PAGES: 3 INCLUDING COVER SHEETTIME SENT: \_\_\_\_\_ OPERATOR'S NAME Tina

## CERTIFICATION OF FACSIMILE TRANSMISSION

I hereby certify that this paper is being facsimile transmitted to  
the Patent and Trademark Office on the date shown below.Christina M. Spencer  
Typed or printed name of person signing certificationChristina M. Spencer 7/7/05  
Signature DateType of paper transmitted: Request for One Month Extension of  
TimeApplicant's Name: David W. Koenig, et al.Serial No. (Control No.): 10/624,186 Examiner: McCormick EwoldtFiling Date: 7/22/03 Art Unit: 1615 Confirmation No.: 6849Application Title: WIPE AND METHODS FOR IMPROVING SKIN HEALTHIF YOU DO NOT RECEIVE ALL PAGES CLEARLY, CALL BACK AS SOON AS  
POSSIBLE. CONFIRMING NUMBER IS (314) 231-5400.

KCC 4929 (K-C 18,622)  
PATENT

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CENTRAL FAX CENTER

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Art Unit 1615 JUL 07 2005

Application of David W. Koenig et al  
Serial No. 10/624,186  
Filed July 22, 2003  
Confirmation No. 6849  
For WIPE AND METHODS FOR IMPROVING SKIN HEALTH  
Examiner MCCORMICK EWOLDT, SUSAN BETH

July 7, 2005

PETITION FOR EXTENSION OF TIME

TO COMMISSIONER OF PATENTS,

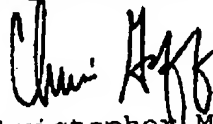
SIR:

Applicant hereby petitions for a one month extension of time up to and including July 9, 2005, in the above-identified application.

This extension is being obtained to ensure co-pendency of the subject application and a continuation application being filed simultaneously herewith.

The Commissioner is hereby authorized to charge \$120.00 for the one month extension of time, as well as any under-payment or credit any over-payment, to Deposit Account No. 19-1345.

Respectfully submitted,



Christopher M. Goff, Reg. No. 41,785  
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07/11/2005 MBINAS 00000001 191345 10624186  
01 FC:1251 120.00 DA

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JUL 07 2005

FEE TRANSMITTAL

Application Number 10/624,186

Art Unit 1615

Filing Date July 22, 2003

Confirmation No. 6849

Inventor(s) David W. Koenig et al.

Examiner Name McCormick Ewoldt, Susan Beth

Attorney Docket Number KCC 4929

[ ] Applicant claims small entity status.

METHOD OF PAYMENT

[X] The Commissioner is hereby authorized to charge the indicated fees to Deposit Account No. 19-1345. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.

[ ] Check Enclosed. The Commissioner is hereby authorized to charge any under payment or credit any over payment to Deposit Account No. 19-1345.

FEE CALCULATION

1. [ ] BASIC FILING, SEARCH AND EXAMINATION FEES  
(Type: \_\_\_\_\_) Subtotal (1) \$ \_\_\_\_\_

2. [ ] EXCESS CLAIM FEES

Total Claims \_\_\_\_\_ - \_\_\_\_\_ (HP) = \_\_\_\_\_ x Fee \_\_\_\_\_ = \$ \_\_\_\_\_  
Indep Claims \_\_\_\_\_ - \_\_\_\_\_ (HP) = \_\_\_\_\_ x Fee \_\_\_\_\_ = \$ \_\_\_\_\_  
Multiple Dependent Claims Fee \_\_\_\_\_  
(HP = highest number of claims paid for) Subtotal (2) \$ \_\_\_\_\_

3. [ ] APPLICATION SIZE FEE

Total Pages \_\_\_\_\_ - 100 = \_\_\_\_\_ + 50 = \_\_\_\_\_ x \$250 = \$ \_\_\_\_\_  
(Application + Drawings) (round up to whole #)

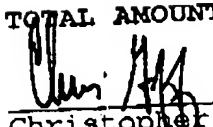
Subtotal (3) \$ \_\_\_\_\_

4. [X] OTHER FEE(S)

[X] One \_\_\_\_\_ month extension of time  
[ ] Information disclosure statement  
[ ] 37 CFR 1.17(q) processing fee  
[ ] Non-English specification  
[ ] Notice of Appeal  
[ ] Filing a brief in support of appeal  
[ ] Request for oral hearing  
[ ] Other: \_\_\_\_\_

Subtotal (4) \$ 120.00

TOTAL AMOUNT OF PAYMENT \$ 120.00

  
Christopher M. Goff, Reg. No. 11,885  
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Date

July 7, 2005